

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Daniel</i>		05-29-01
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	50-20	06-09-01
FORMALITY REVIEW			08/12/01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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